## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

033048-048

. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			37					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			37minus 20=		• 17			X\$ 9=		OR	X\$18=	306	
	EPENDENT CI		_	inus 3 =	D			X40=		OR	X80= .		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			+135=		OR	+270=		
* If	the difference	in column 1, is	less than z	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1016	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL	1	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH - NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 33	Minus	2	3.7	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	···	3	-		X40=		OR	X80=		
	FINST PRESE	NIATION OF MI	JLIIPLE DE	PENDENI	CLAIM		ן י	+135=		OR	+270=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	,	
(Column 1) (Column 2) (Column 3)											A0011.1 CC1		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BEA DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X40=	·	OR	X80=		
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEI		CLAIM		<b>'</b>	+135=		OR	+270=		
							L	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	•••		=	lt	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										070		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	ADDIT. FEE		
		ber Previously Pai					r tour	nd in the app	opriate box	in col	umn 1.		